

**Request for Applications (RFA)
RFA No. APRA 0608-09**



**District of Columbia Department of Health
Addiction Prevention and Recovery Administration**

RFA Title: Prevention Centers

RFA Release Date: June 8, 2009

Application Submission Deadline: by July 17, 2009 at 4:45 p.m.

**Pre-Application Conference: June 17, 2009
1300 First Street, NE, Third Floor
2:00 p.m. – 3:00 p.m.**

For more information call: APRA/Office of Prevention Services at 202-645-0326

Checklist for Applications

Prevention Centers

1. The applicant organization/entity has responded to all sections of the Request for Application.
2. The Applicant Profile, (Attachment A), contains all the information requested and is attached as the Face Sheet.
3. The Program Budget and Budget Narrative are complete and comply with the Budget forms listed as Attachment D of the RFA. The line item budget narrative describes the categories of items proposed. Indirect costs must not exceed 10 percent of the total grant budget. Applications that do not conform to this requirement will not be reviewed.
4. **The application is printed on 8 1/2 by 11-inch paper, double-spaced, on one side, using 12-point type with a minimum of one inch margins, with all pages numbered.** Applications that do not conform to this requirement will not be reviewed.
5. The application is submitted in a sealed envelope. Sealed envelopes **must be** clearly identified by the organization name, RFA number, project name, and selected Geographic Designation using Attachment E-APRA Receipt. Unsealed and unidentified applications will not be accepted.
6. Narrative for sections B-Program Narrative, C-Proposed Project Plans, D-Program Process Evaluation and Reporting, and E-Applicant Qualifications **does not exceed a total of 30 pages.**
7. The applicant submits the required six (6) copies of its proposal. Of the six (6) copies, one (1) copy must be an original. If the applicant fails to submit the required six (6) copies with one of the six stamped "original", the application will not be reviewed.
8. The application proposal format conforms to the "Proposal Format" listed in Section IV.A, of the RFA. Applications that do not conform to the proposal format will not be reviewed.
9. The Certifications and Assurances listed in Attachments B and C are signed.
10. The appropriate appendices, including a District business or other operating license; annual report or other documentation reflecting five-years of community level prevention work in the selected Wards on issues affecting children and youth; a minimum of 10 Memoranda of Understanding or pledges of support from key community networks and/or community partners in the selected geographic area; job descriptions; staff resumes; and other supporting documentation listed under Section IV.A are enclosed.
11. The application designates a geographic area to be served that is consistent with guidelines provided in II.A.
12. The application is submitted no later than 4:45 p.m. by the deadline date of July 17, 2009 to DOH/Addiction Prevention and Recovery Administration, Mark Lassiter, 1300 First Street NE, 3rd Floor, Washington, DC 20002.

13. **Applications accepted at or after 4:46 p.m. July 17, 2009 will not be forwarded to the Review Panel for funding consideration. Any additions or deletions to an application will not be accepted after the deadline of 4:45 p.m.** Applicants will not be allowed to assemble application materials on the premises of DOH. Applications must be ready for receipt by DOH.

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**District of Columbia Department of Health (DOH)
Addiction Prevention and Recovery Administration (APRA)
Request for Applications (RFA)**

Prevention Centers

I Background and General Information

Across the District of Columbia (District), adults are concerned about the healthy development of young people and committed to a vision of change for their communities—a vision where all children and youth are healthy and able to reach their full potential.

Underage drinking and other drug use are too often destroying those hopes and dreams. Substance abuse takes a devastating toll on many citizens within the District, but children and youth are at greater risk. While cause and effect is not established, District data show that youth problems such as low school performance, juvenile delinquency, sexual activity, and other risky behaviors are linked to the early use of alcohol, tobacco, and other drugs.

The District government remains committed to addressing the complex and interrelated issues affecting youth. The healthy development of our children and youth requires active and sustained citizen participation, community-wide ownership of problems, and local action tailored to local needs.

In the District of Columbia, the Department of Health (DOH) has the primary challenge and mission to promote healthy lives, prevent illness, facilitate access to quality healthcare services, and protect the safety of all in the nation's capital. DOH's Addiction Prevention and Recovery Administration (APRA), the District's Single State Authority (SSA) for Substance Abuse, has a vision of a healthy and drug-free city and a program mission to facilitate prevention, treatment, and recovery support services throughout the District. To this end, APRA is undergoing the most significant transformation of substance abuse services in the District's history. Substance abuse prevention services are an integral part of that vision, mission, and transformation.

A. DOH/APRA Prevention Direction

The new direction for substance abuse prevention services in the District is designed to strengthen communities as places where children and youth are safe, connected in positive ways to others, and supported by involved, responsible adults. It also involves developing and strengthening the capacity of the District's prevention provider network to meet the challenging substance abuse prevention needs within the eight Wards and 120 neighborhoods, and provide more comprehensive, integrated, and community-based substance abuse prevention services.

The DOH/APRA Fiscal Year 2010 plan includes specific prevention approaches that are designed to significantly contribute to the development of a sustainable prevention infrastructure in the District of Columbia. This infrastructure will help support efforts to prevent the onset, reduce risk, interrupt the progression of use, and avoid the

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consequences of alcohol, tobacco and other drug use in the District. Community input from more than 200 District agencies, organizations, and individuals provided guidance on the issues, prevention needs, and current resources that exist within the eight Wards. This input led to a more comprehensive and integrated plan and related prevention approaches. These approaches consist of:

Prevention Centers. Develop Prevention Centers that strengthen community capacity, address needed community and system changes, reduce substance abuse risk factors, and achieve target outcomes for District children and youth across all eight Wards and 120 neighborhoods. These Centers are envisioned as dynamic hubs that engage, support, and help connect the many community elements that are needed for promoting healthy children, youth, and families as well as a drug-free city.

Prevention Leadership. Strengthen the capacity of District substance abuse prevention leaders to deliver evidence-based programs and practices and target prevention grant services in order to provide the highest quality services to the largest number of people.

Prevention Practices. Continue work with an expanded District-wide network of prevention program providers and fellow health professionals throughout the nation to seek new innovations, develop and implement best practices, and explore how these practices can be modified to meet the needs of District residents.

This Fiscal Year 2010 DOH/APRA Request for Applications invites interested and eligible applicants to apply to develop one of four Prevention Centers serving specific geographic areas within the District.

B. Building Prevention Centers on a Strong Foundation

Prevention Centers for the District will be built on a strong foundation of research and best prevention practice, including the public health model that addresses multiple, interrelated causes of substance abuse, and strategies that address factors that protect children and youth from exposure to or reduction in the risk factors for substance abuse among these populations. These risk factors include:

- Perceived availability of alcohol, tobacco, and other drugs (ATOD) among children and youth;
- Community laws and norms favorable toward ATOD use among children and youth;
- Low neighborhood attachment and community disorganization connected to ATOD;
- Favorable parental, caregiver, and other adult attitudes toward ATOD use among youth;
- Negatively impacted commitment to school due to ATOD use;

- Friends/peers who engage in ATOD use; and
- Early initiation of ATOD use among children and youth.

Prevention research shows that some children exposed to multiple risk factors manage to avoid problem behaviors such as substance abuse even though they are exposed to the same risks as those who develop behavior problems. “Protective factors and processes” appear to buffer children and youth from the negative effects of exposure to risk. While individual characteristics play an important role, positive (pro-social) bonding works with healthy and clear standards to produce healthy behaviors. Pro-social bonding is a commitment or investment in the future. When families or other adults, schools, and communities have clearly stated policies and expectations for young people’s behavior, children are protected from risk and less likely to become involved in problem behavior such as substance use and abuse.

Research also shows that environmental approaches that are based on a community systems perspective are needed. These approaches suggest substance abuse is a product of multiple environmental conditions and circumstances.

According to this view, youth do not engage in substance abuse solely on the basis of personal characteristics but rather on a complex set of factors in their environment. These factors include the rules and regulations of the social institutions to which individuals belong; trust, social ties, relationships and exchanges among people; the norms of the communities in which they live; the messages to which they are exposed; and the availability and accessibility of ATOD to minors. Therefore, it is productive to focus on a community-wide approach to prevention and prevention interventions that address all areas of a young person’s life.

Under this Request for Applications, the following statements and definitions are applicable:

- Prevention emphasizes zero tolerance of illicit drug use by all persons as well as the use of ATOD by children and youth.
- Prevention is defined as creating conditions for healthy individuals, families, and communities to reduce risk of and increase protection from ATOD use among children and youth.
- Children and youth are defined as persons ages 8 to 18.
- Community prevention is defined in terms of locations where people live, work, and play and often results in partnerships or “prevention networks.” These partnerships and networks include, but are not limited to: (1) geographic and administrative boundaries (i.e., tracts, political, school districts, neighborhoods, housing developments, recreational catchment areas); (2) boundaries of purpose (parents/families/caregivers, faith organizations, community-based organizations, and prevention program services); (3) and language or cultural values and norms.

- Community capacity refers to the ability of individuals at the local level to work together to affect conditions that increase risk for substance abuse among children and youth. These efforts are strategic and not a one-time response to an issue, but rather occur over time and result in incremental community and systems change, reduction in risk, and improvement in targeted outcomes.

C. Summary of Availability of and Eligibility for Grant Funds

APRA announces the availability of grant funds for Fiscal Year 2010 to develop Prevention Centers to collectively serve all eight Wards and 120 neighborhoods within the District of Columbia. This grant opportunity is supported by funding from the U.S. Department of Health and Human Services (DHHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Substance Abuse Prevention and Treatment Block Grant.

1. Potential funding level and number of awards

APRA projects that a total amount of up to \$840,000 will be available to support four Prevention Centers in the average amount of \$210,000 for each grant award. The number of awards and amounts are subject to change depending upon Federal funding levels and the quality and quantity of the applications for funding.

2. Eligible organizations/entities and administrative requirements

Qualified non-profit and for-profit community-based organizations addressing community and public health, substance abuse, and children and youth issues are eligible and invited to submit applications. This may include consortiums, collaborations, and partnership groups if the lead agency is named in the application, administers the grant, and actively participates in grant activity.

No mini-grants or sub-grants are permitted for any entity that is awarded funding under this Request for Applications and individuals are not eligible to apply under this Request for Applications. While schools and related institutions are an integral part of a community and eligible to submit an application, this Request for Applications is focused on the broader community system and not geared to funding school-based services or small population evidence-based programs.

NOTE: To be considered for review and funding, applications must meet all of the administrative criteria listed below. *The failure to meet any **one** of the following criteria will mean the application is ineligible for further review and award.*

Applications must meet all of the following administrative criteria:

1. The Program Budget and Budget Narrative are complete and comply with the Budget forms listed as Attachment D of the RFA. The line item budget narrative describes the categories of items proposed. Indirect costs must not exceed 10 percent of the total grant budget. **Applications that do not conform to this requirement will not be reviewed.**

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9. The application designates a geographic area to be served that is consistent with guidelines provided in II.A.
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3. Award period

The grant(s) will be for a period of one (1) year from date of award. The grants(s) may be continued for up to an additional two (2) years based on project success, conformity with DOH/APRA goals and objectives, and the availability of funding. Grant recipients will be expected to begin project implementation on October 1, 2009. Objectives and targeted outcomes for the Prevention Centers may change as the overall prevention system evolves and as APRA assesses their overall effectiveness.

4. Priority risk factors and targeted outcomes

The applicant will address the three District wide substance abuse prevention outcomes listed below and the priority risk factors that have been documented as contributing to ATOD use among children and youth in the District. Priority risk factors and outcomes are expected to expand or change as the District strengthens efforts to build a

substance abuse data infrastructure. APRA will provide specific District wide data measures to determine annual progress toward outcomes.

Outcome: Increase in attitudes opposed to children and youth ATOD use	Outcome: Delay of first use (onset) and progression of risk and ATOD use among children and youth	Outcome: Families, youth, and citizens are part of their community's planning, decision-making and evaluation for substance abuse prevention
Risk factor: Favorable parental, caregiver, and adult attitudes toward ATOD use among youth	Risk factor: Early initiation of ATOD use among children and youth	Risk factor: Low neighborhood attachment and community disorganization contributing toward ATOD use among children and youth
Risk factor: Friends/peers and family who engage in ATOD use	Risk factor: Availability of alcohol, tobacco, and other drugs	Risk factor: Community laws and norms favorable toward ATOD
	Risk factor: Friends/peers who engage in ATOD use	

II Prevention Centers Program Scope

A. Geographic Service Area

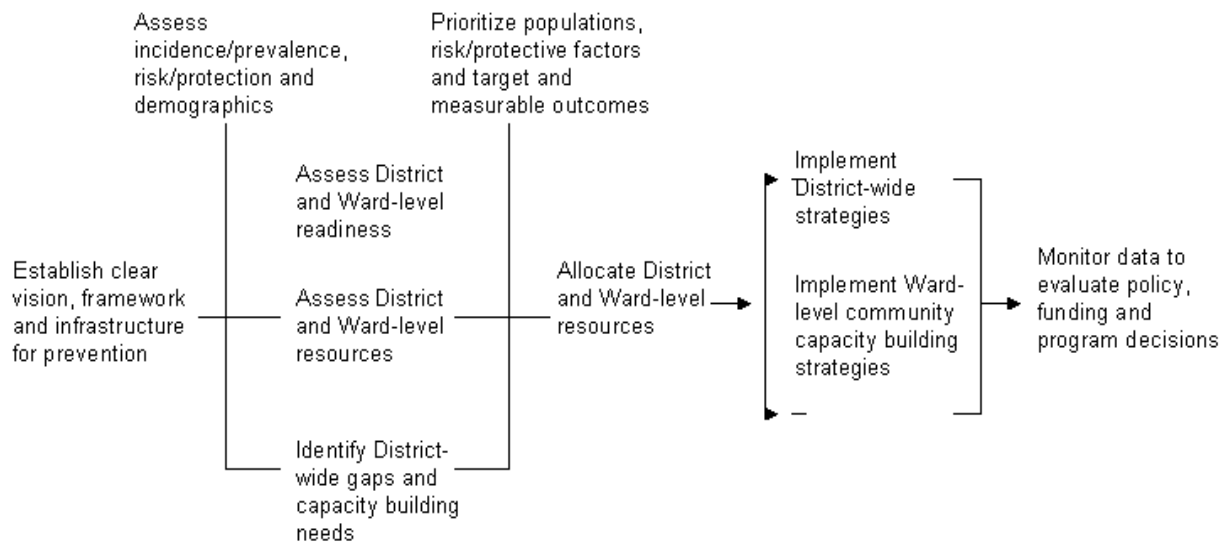
Each applicant proposing to develop a Prevention Center must serve all Wards and neighborhoods that fall within one of the following geographic designations:

- Prevention Center: Wards 1 and 2
- Prevention Center: Wards 3 and 4
- Prevention Center: Wards 5 and 6
- Prevention Center: Wards 7 and 8

B. Community Capacity Building Core Deliverables

Community capacity building is a central concept that guides prevention efforts in the District of Columbia. Capacity building encompasses the vision of a healthy community with a mission, vision, and goals that prevent the onset, reduce risk, and interrupt the progression of drug use. Capacity building includes the identification of specific community targets of change, such as the number of alcohol and tobacco outlets in a neighborhood or the different messages that youth receive about the harmfulness of drug use, that lead to a change in policies, programs, or practices; lead to improved education, leadership, and systems change; and result in targeted outcomes.

The following graphic is an overview of the more comprehensive substance abuse prevention system and the context in which Prevention Centers operate:



Applicants are expected to address the following capacity building core deliverables in the application in ways that address the unique characteristics and priorities of the geographic area to be served. It is anticipated that the strategies and level of activity may vary based on unique circumstances that exist in individual Wards. The interrelated strategies should result in targeted community changes, reductions in priority risk factors, and, over time, changes in targeted prevention outcomes.

1. Community education

This core area requires the Prevention Centers to serve as a source of current, comprehensive, and relevant prevention information for a wide range of audiences in their respective geographic areas, including members of the public, youth, families, service providers, and policymakers.

- Market the entity as a Prevention Center, using a consistent logo, graphic design, and other identifiers to be developed in cooperation with APRA;
- Increase public awareness of gateway drugs, effects, and consequences to targeted audiences within the Prevention Center's geographic area using APRA-provided fact sheets with District wide data;
- Develop an ongoing process to track and communicate the use of new and emerging drug trends, their effects, and potential and real consequences within the Prevention Center's geographic area;
- Disseminate APRA-provided or approved written/audio-visual prevention education resources to diverse audiences at health fairs, community events, and other targeted activities;
- Coordinate and participate in community forums and speaking engagements on core substance abuse prevention topics that will be prioritized in cooperation with APRA;

- Coordinate local strategies in support of national substance abuse prevention campaigns such as Red Ribbon, Alcohol Awareness Month, Fetal Alcohol Syndrome Month, alcohol and drug-free holiday messages in coordination with APRA;
- Participate in the development and coordination of local strategies for APRA DC wide social marketing campaigns that deliver substance abuse prevention messages and aim for community changes in behavior (the Year 1 focus will be on establishing a DC Prevention Network and a DC Youth Prevention Corps);
- Develop, continuously update, and maintain a basic web page for the Prevention Center that is linked to the APRA website (APRA will work with the Prevention Centers on a consistent format, graphic design, and technical specifications);
- Participate in local activities in support of special Federal initiatives such as the Synar Tobacco Amendment, and the Enforcement of Underage Drinking Laws (EUDL) Grant Program through the D.C. Justice Grants Administration; and
- Disseminate information to community partners and networks about new substance abuse prevention data and research, funding opportunities, conferences and training events, and other information through online communication and face-to-face meetings. APRA will provide District-wide information for distribution.

2. Community leadership

This core area requires the Prevention Centers to develop new and/or strengthen existing community networks and to enhance the capacity of these networks to understand the needs of the Wards, identify and assess resources, and create opportunities for the networks to address substance abuse prevention issues.

- Identify community and faith-based prevention partners and create an accessible, comprehensive database of contact information on individual leaders and other concerned citizens, agencies, organizations, networks, and programs;
- Create, in cooperation with APRA, and maintain a database of existing and new substance abuse prevention programs, strategies, and practices that are in place within the designated geographic area that address known risk factors and increase protection; intervene early and/or at developmentally appropriate times; reach individuals and neighborhoods at highest risk; work with diverse groups in the community; has evidence of effectiveness; and can be integrated into a prevention system to address priority risks with multiple strategies;
- Identify existing and build new community prevention networks, composed of identifiable partners, to enhance community education, community leadership, and active involvement in substance abuse prevention community capacity building opportunities;

- Identify and provide structured training and technical assistance on core topics to the community prevention networks. The training and technical assistance activities will have a clear purpose, objectives, outcomes, curricula, and follow-up support to increase knowledge, skills, and involvement in substance abuse prevention. These core topics will be developed in cooperation with APRA as part of a more comprehensive DC- wide capacity building strategy for prevention leaders;
- Coordinate community panels and forums on substance abuse prevention that address topics of importance to the community prevention networks and strengthen local capacity to address needed substance abuse prevention changes in the community;
- Serve as the Prevention Center representative on community inter-agency councils, task forces, Federal grant advisory committees, enforcing underage drinking laws, Community Prevention Network, and other special initiatives designed to strengthen community capacity to address substance abuse prevention issues;
- Create opportunities for community prevention networks to come together to envision and support a healthy, drug-free future, outline community improvement to reduce the risk of substance abuse among children and youth, set priorities for community change, and create the social will to drive the movement forward.

3. Community changes

APRA's goal is to support the development and implementation of a collaborative substance abuse prevention plan for each Ward that addresses the priority risk factors and targeted prevention outcomes.

In Year 1, Prevention Centers are to work with multiple networks to develop a strategy consisting of a vision, goals, community targets for change, and potential action steps, and that will lead to a planning process and a formal prevention plan for each Ward in Year 2 that includes these four steps:

- Community Assessment: an analysis and summary of Ward level baseline information to establish substance abuse prevention need, risk and protective factors, and resource and readiness gaps.
- Community Strategy: vision, goals, community targets for changes, and action steps to address community and system changes for substance abuse prevention, priority risk factors, and outcomes.
- Community Implementation: monitor and/or provide technical assistance support for the implementation of the community strategy.
- Community Changes: document community changes in policies, programs, and practices related to the community strategy and disseminate results within the

designated geographic area and to other Prevention Centers, APRA, and community stakeholders.

III Prevention Data Collection and Reports

APRA's objective is to develop and sustain a substance abuse data and evaluation system and to move toward the use of data for substance abuse planning, evaluation, quality improvement, and resource allocation. APRA is required to collect program and other data annually for the Substance Abuse Prevention and Treatment (SAPT) Block Grant that includes National Outcome Measures (NOMs). Some SAPT Block Grant information will be extracted through Prevention Center Quarterly Program Progress Reports. APRA will consult with and provide templates to the Prevention Centers with narrative and data collection requirements.

The following chart provides a summary of SAPT Block Grant prevention NOMs that Prevention Centers will be required to report on quarterly.

National Outcome Measures	Measures	Prevention Center Role
1: Employment/Education-Returned to and stay in school; increased and sustained employment	ATOD related suspensions and expulsions Attendance and enrollment Perception of workplace policies	Centers will report available findings from District surveys or APRA approved data collection tools
2: Crime and Criminal Justice Outcome-Decreased criminal justice involvement	Alcohol-related car crashes and injuries Alcohol and drug-related crime and arrests	Centers will report available findings from District or Federal surveys, focus group information, or APRA approved data collection tools
3: Social Connectiveness-Increased social supports and connectiveness	Family communication around alcohol and drugs Youth seeing, reading, watching, or listening to a prevention message	Centers will report process data from the Community Education deliverables
4: Access/Capacity-Outcome - Increased access to services (service capacity)	Individual based program and strategies (number of persons served by age, gender, race and ethnicity) Population based programs and strategies (number of persons served by age, gender, race and ethnicity) Number of persons served by type of intervention (individual or population based) and universal, selective, and indicated	Centers will report process data from all Community Capacity Building deliverables

5: Cost Effectiveness- Services provided within cost bands	Not required.	Not required.
6: Use of Evidence-Based Practices	Total number of evidence- based programs and strategies Number of evidence-based programs and strategies by type of intervention (universal, selective, and indicated)	Centers will report process data from Community Capacity Building deliverables and report in required databases

IV. Application Format and Narrative Instructions

Applicants are required to use the format and follow the narrative instructions provided below.

A. Proposal Format

- Applicant Profile (Attachment A)
- Table of Contents
- Narrative for sections B-Program Narrative, C-Proposed Project Plans, D-Program Process Evaluation and Reporting, and E-Applicant Qualifications (not to exceed 30 pages)
- Program Budget and Budget Narrative (Attachment D)
- Proposed Work Plan (Attachment F)
- Appendices
 - Appendix 1: Certifications and Assurances (Attachments B and C)
 - Appendix 2: Most recent annual audit, financial statement, or tax return
 - Appendix 3: IRS letter of non-profit corporation status, if applicable
 - Appendix 4: Proposed organization chart for the Prevention Center
 - Appendix 5: Minimum of 10 Memoranda of Understanding or pledges of support from key community networks and/or community partners (i.e., essential community groups that are not part of a network) in the selected designated area. Community prevention networks include, but are not limited to: (1) geographic and administrative boundaries (i.e., tracts, political, school districts, neighborhoods, housing projects and developments, recreational catchment areas); (2) boundaries of purpose (faith organizations, community-based organizations, and prevention program services); (3) and language or cultural values and norms.
 - Appendix 6: Proposed Prevention Center staff resumes
 - Appendix 7: Proposed Prevention Center staff job descriptions

- Appendix 8: Signed agreement to market the entity as a DC Prevention Center on all entity materials (letterhead, business cards, written and electronic materials)
- Appendix 9: District business or other license to operate in the District
- Appendix 10: Annual report or other documentation of a five-year history of supporting substance abuse prevention (or interrelated prevention) work at the community level in the selected Wards on issues affecting children and youth

B. Program Narrative

The program narrative section must identify the selected geographic areas to be served by the Prevention Center, describe the applicant's proposed facility and understanding of the communities that the Prevention Center will serve, and discuss the process the applicant will use to meet all requirements, deliverables, and targeted outcomes. In 15 pages or less, respond to the following requirements:

1. Identify your selected geographic area and assess its prevention challenges and readiness for change

- a. Identify the specific designated Wards that your Prevention Center will serve (see Section II.A for approved designations) and present your rationale for the selection.
- b. Describe the facility your organization will use to house the Prevention Center. Identify its specific location, size, attributes, and site control status (e.g., applicant owns, rents, intends to rent facility). Discuss why this facility has been chosen for Prevention Center operations.
- c. Assess these communities in light of the priority risk and protective factors described above in Section I.C.4, the prevention oriented community networks that are in place, and other unique local conditions or trends that would contribute to or protect against youth drug use and to overall community readiness to work on prevention issues, citing data sources as available.

Note: For the purposes of this application, readiness criteria include but are not limited to a history of community cooperation and conflict on substance abuse prevention issues; financial and human resources dedicated to prevention; strength and depth of community leadership dedicated to prevention; demonstrated commitment to working cooperatively in community partnerships; demonstrated leadership capacity for serving as catalysts for community change; and active prevention efforts already underway as demonstrated by community changes facilitated by multiple sectors, a variety of appropriate strategies, and data driven outcomes.

2. Discuss your vision of effective substance abuse prevention in the selected geographic areas

- a. With respect to substance abuse prevention, how would you describe and characterize a high functioning Ward?

- b. In light of your response to (1.c) and (2.a) above, describe your vision for the selected Wards at the end of the first grant year.

3. Describe your process for creating and operating a Prevention Center in the selected Wards

- a. Provide a detailed Year 1 work plan using Attachment F-Proposed Work Plan that demonstrates how you will establish a Prevention Center in the designated geographic areas and produce the required deliverables. The work plan must include goals and objectives and key implementation activities for each of the core program areas, start and completion dates for these activities, and key personnel. The Proposed Work Plan does not count toward the page limit for this section.
- b. Identify the existing prevention community networks and other key stakeholders you will work with and describe how you will effectively assist, support, and engage them to develop their capacity to work toward specific community targets of change. Provide Memoranda of Understanding and/or pledges of support from networks and other key stakeholders in Appendix 5.
- c. Discuss any critical challenges you anticipate in working with community networks and other aspects of establishing a Prevention Center. Describe how you will plan for and the types of strategies you will use to address these anticipated challenges.

C. Proposed Project Plans

The proposed project plans narrative must describe how the applicant will organize, staff, and manage a community-based Prevention Center in the designated geographic areas. The discussion must cover the organizational structure for the Prevention Center, types and qualifications of staff, and overall management approach. In five pages or less, respond to the following requirements:

1. Describe how your organization will organize human resources to create and operate a Prevention Center

- a. Provide an organization chart that shows how staff and others will be deployed to establish and implement the Prevention Center and related work plan. The organization chart will not count as part of the five pages.
- b. Discuss how the proposed organizational structure supports and encourages open and candid communication at all levels of the Prevention Center and with diverse segments of the community.

2. Discuss Prevention Center staffing and leadership development

- a. Provide the level of effort by position for staff proposed for the Prevention Center.

- b. Describe the roles and responsibilities of key staff of the Prevention Center. Provide detailed job descriptions in Appendix 7.
- c. Summarize the most critical qualifications of key staff of the Prevention Center. Information on staff qualifications must include knowledge of and experience working at the community level on health and substance abuse prevention issues of youth in the designated geographic areas. Qualifications of the Project Director must also include senior management experience that includes budget development and monitoring, personnel management, program development, community development, and speaking and reporting skills. Include resumes of proposed staff in Appendix 6.
- d. Describe the mechanisms for expanding and strengthening the leadership skills of Prevention Center staff throughout the grant period, including internal staff development activities and other training incentives.

3. Discuss community input mechanisms

- a. Describe the structures and approaches your organization will use to ensure that input from members of the communities served by the Prevention Center are reflected in Prevention Center operations, policies, and procedures.

4. Discuss fiscal management

- a. Describe how your organization will provide sound fiscal management for the project, including experience in managing other grant funds. Include a summary of the fiscal system currently in place that will support the Prevention Center.

D. Program Process Evaluation and Reporting

The program process evaluation and reporting narrative must discuss the applicant's plan to monitor the effectiveness of its program implementation efforts; describe how it will use these evaluation data to inform and enhance the Prevention Center's work; provide progress reports and NOMs data; and meet other APRA requirements. In five pages or less, respond to these requirements:

1. Present a plan to monitor the development and progress of the Prevention Center

- a. Present and discuss the components of a process evaluation plan. Describe how data that measure progress on the work plan and achieving community targets of change are to be collected, assessed, and reported.
- b. Identify and describe the qualifications of staff and/or others who will manage process evaluation activities and discuss their process evaluation roles and responsibilities.

2. Discuss the internal use of process evaluation data

- a. Discuss how data will be used to enhance the management of the program and make adjustments to improve Prevention Center performance.

3. Describe the process to be used to meet reporting requirements

- a. Discuss the methods to be used to collect, assemble, and deliver required quarterly progress and data reports on a timely basis, including staff responsibilities and technical supports that will be in place.

E. Applicant Qualifications

The qualifications narrative must discuss the applicant's experience and capability to create and manage a Prevention Center in the designated geographic area. This narrative will provide evidence that the applicant is able to marshal community networks, plan, lead and facilitate the efforts of others to reduce risk factors and achieve targeted outcomes. In five pages or less, respond to these requirements:

1. Describe prevention activities

- a. Discuss in detail your organization's specific involvement and roles in prevention activities in the last five years in the designated communities, in particular, your involvement with existing community networks.

2. Discuss mission and compatibility between your organization and the Prevention Center

- a. Discuss how the Prevention Center will enhance or is compatible with your organization's mission and future plans.
- b. Discuss why your organization (and any partners in the application) is "best" qualified to lead the effort to create and operate a Prevention Center in the designated geographic area.

F. Program Budget and Budget Narrative

The applicant must provide a line-item budget and detailed budget narrative for each category listed in the budget. The narrative should clearly state how the applicant arrived at the budget figures.

Attachment D provides a budget form and a budget narrative form. Salaries and wages for full and part-time project staff are to be included in the Personnel budget category. Fringe benefits for full and part-time staff are included under a separate category. Other direct costs can include expenditures for Occupancy (e.g. rent, facility insurance, utilities, maintenance), Travel & Transportation (e.g., local mileage, Metrorail, and bus), Supplies & Minor Equipment (e.g., stationery, pens, paper, postage, computers, desks, chairs, copy machines, digital camera, cabinets), Communications (e.g., telephone, Internet, printing and copying), and Other Direct Costs (e.g., consultants, other

miscellaneous costs). The components of the Indirect Cost should be explained (e.g., fiscal and administrative support) and the Indirect Cost cannot exceed 10 percent of the total project budget.

V Application Review and Scoring

All applications that are complete and meet the eligibility and administrative criteria listed in section I.C.2 will be reviewed and scored by an independent review panel. Scoring and the recommendations of the review panel are advisory only. The final decision to fund a Prevention Center application rests solely with DOH. In addition, an applicant's past performance on DOH grants can be considered in making final award decisions.

All applications for this RFA will be objectively reviewed and scored against the following key criteria:

Criterion V.B.1. Selected Geographic Area and Assessment (Total of 15 points)

- a. The applicant identifies an approved geographic area to be served and provides a clear and reasonable rationale for selecting the designated area for program implementation.
- b. The applicant proposes a suitable facility that offers adequate and appropriate space, is located within one of the Wards being served, and will be available for program activities within a reasonable period of time following award.
- c. The applicant demonstrates an understanding of the risk and protective factors that exist within the designated Wards that contribute to substance abuse among children and youth, identifies resources (including networks) that exist and those that are needed, and effectively uses data and other knowledge to present evidence of unique local conditions or trends affecting community readiness to work cooperatively toward prevention of substance abuse among children and youth.

Criterion V.B.2. Prevention Vision in the Designated Geographic Area (Total of 5 points)

- a. The applicant articulates a comprehensive vision for substance abuse prevention that marshals key elements of a community and engages in ongoing planning and research-based strategies that work toward clear, measurable outcomes (i.e., elements of a high functioning Ward).
- b. The applicant articulates a comprehensive, realistic vision for its selected designated area that reflects its current assessment of these communities (described under IV.B.1c), and desirable targets of change.

Criterion V.B.3. Process for Creating and Operating a Prevention Center (Total of 30 points)

- a. The applicant's work plan is complete, listing objectives and key activities that address the requirements for each of the core program areas, a realistic implementation schedule, and key personnel for implementation.
- b. The applicant identifies relevant community partners and community networks to be engaged in Prevention Center activities, discusses why these partners are essential, and identifies the strategies that will be undertaken to engage these partners. Recent Memoranda of Understanding and/or pledges of support from relevant community partners and community networks are included in Appendix 5.
- c. The applicant reflects the practical experience it will apply in planning and implementing the Prevention Center and in working in the designated communities; has thought ahead to potential implementation obstacles and challenges; and reflects that thinking in the proposed implementation approach and schedule.

Criterion V.C.1. Organizational Structure (Total of 5 points)

- a. The applicant provides an organization chart for the Prevention Center that supports the RFA requirements and proposed work plan and shows clear lines of authority and areas of responsibility.
- b. The applicant provides a clear discussion of how the organizational structure supports and encourages communication internally and externally. The discussion reflects an understanding of diverse community populations and perspectives.

Criterion V.C.2. Staffing and Leadership Development (Total of 10 points)

- a. The applicant presents a staffing plan that identifies staff positions, number of staff, and levels of effort for each position.
- b. The applicant provides job descriptions for key staff and any volunteer positions that identify major duties and responsibilities, lines of reporting, and qualifications needed.
- c. The applicant includes information on the knowledge and experience of proposed staff in working on prevention issues of children and youth in the designated geographic area. The proposed Project Director meets or exceeds all requirements for the position.
- d. The applicant presents a plan for ongoing Prevention Center staff development.

Criterion V.C.3. Community Input (Total of 5 points)

- a. The applicant presents cogent and realistic plans for encouraging and documenting ongoing community input regarding the Prevention Center's operations, policies, and procedures.

Criterion V.C.4. Fiscal Management (Total of 5 points)

- a. The applicant describes the components of a sound fiscal management system that is in place, managed by qualified staff, and has been used to support government grant monitoring and reporting functions within the past five years.
- b. The applicant has submitted a copy of its most recent annual audit, financial statement, or tax return in Appendix 2 and is in good financial standing.

Criterion V.D.1. Program Process Evaluation (Total of 5 points)

- a. The applicant outlines a clear, logical process evaluation plan that includes objectives, methodologies, and reporting. The discussion addresses how the evaluation process will be implemented and maintained.
- b. The applicant identifies evaluation resources and discusses roles and responsibilities.

Criterion V.D.2. Use of Process Evaluation Data (Total of 2 points)

- a. The applicant discusses how program operations will be informed and improved using data obtained through process evaluation efforts.

Criterion V.D.3. Reporting (Total of 3 points)

- a. The applicant discusses how required progress and data reports will be effectively addressed.

Criterion V.E.1. Organizational Experience in Prevention (Total of 10 points)

- a. The applicant presents sufficient and relevant substance abuse prevention experience over the past five years, including work with community networks in the designated geographic area, to demonstrate its ability to carry out effectively the proposed project.

Criterion V.E.2. Mission Compatibility and Organizational Experience (Total of 5 points)

- a. The applicant provides adequate assurance that its mission and the mission of the Prevention Center are compatible and complementary.
- b. The applicant demonstrates an understanding of its strengths and weaknesses in creating and operating a Prevention Center and identifies the factors for success that are central to its qualification for award. The applicant presents evidence of a well-established infrastructure that includes a Board of Directors, written policies and procedures, and by-laws.

VI Attachments to the RFA

Attachment B	Certifications
Attachment C	Assurances
Attachment D	Budget and Budget Narrative Forms
Attachment E	APRA Receipt Form
Attachment F	Proposed Work Plan

Attachment A

**District of Columbia Department of Health
Addiction Prevention and Recovery Administration
RFA No. APRA 0608-09
Substance Abuse Prevention Centers**

Applicant Profile

APPLICANT NAME: _____

TYPE OF ORGANIZATION: ☐ Non-Profit Organization ☐ For-Profit Organization ☐
Other: _____

Contact Person: _____

Title: _____

Street Address: _____

City, State ZIP: _____

Telephone: _____

Fax: _____

Email Address: _____

Ward: _____

Organization Web-site: _____

Names of Organization

Officials:

Board Chair: _____

Board Treasurer: _____

Chief Executive Officer: _____

Chief Financial Officer: _____

Abstract (Limit 200 words)

Signature of Authorized Official: _____

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Department of Health



**Certifications Regarding
Lobbying, Debarment and Suspension, Other Responsibility Matters, and Requirements
for a Drug-Free Workplace**

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact.

1. Lobbying

As required by Section 1352, Title 31 of the U.S. Code and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

- (a) No Federally appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress; an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;
- (b) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form -III, "Disclosure of Lobbying Activities," in accordance with its instructions;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers including subgrants, contracts under grants and cooperative agreements, and subcontracts and that all sub-recipients shall certify and disclose accordingly.

2. Debarments and Suspension, and Other Responsibility Matters (Direct Recipient)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67, Section 67.510-

The applicant certifies that it and its principals:

- A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- B. Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public Federal, State, or local transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- C. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or Local) with commission of any of the offenses enumerated in paragraph (I)(b) of this certification; and
- D. Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or Local) terminated for cause or default; and

Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. Drug-Free Workplace (Awardees Other Than Individuals)

As required by the Drug Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F. for Awardees, as defined at 28 CFR Part 67 Sections 67.615 and 67.620;

The applicant certifies that it will or will continue to provide a drug-free workplace by:

- A. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.
- B. Establishing an on-going drug-free awareness program to inform employee's about:
 - (1) The dangers of drug abuse in the workplace;
 - (2) The applicant's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.
 - (5) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a).
 - (6) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee would---
 - (7) Abide by the terms of the statement; and

- (8) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.
- (9) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title to: The Office of the Senior Deputy Director for Health Promotion, 825 North Capitol St. NE, Room 3115, Washington DC 20002. Notice shall include the identification number(s) of each effected grant.
- (10) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted ---
- (a) Taking appropriate personnel action against such an employee, up to and incising termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (b) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by Federal, State, or local health, law enforcement, or other appropriate agency.
 - (c) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (I), (c), (d), (e), and (1).
- (11) The applicant may insert in the space provided below the sites) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

Drug-Free Workplace Requirements (Awardees who are Individuals)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, subpart F, for Awardees as defined at 28 CFR Part 67; Sections 67615 and 67.620-

- (12) As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and
- (13). If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to:

D.C. Department of Health, 825 N. Capitol St., NE, Washington, DC 20002

As the duly authorized representative of the applicant/organization, I hereby certify that the applicant will comply with the above certifications.

Applicant Name: _____ IRS/Vendor ID: _____

Applicant Address: _____

Authorized Representative: _____ (Print Name & Title)

Signature: _____ Date: _____

ATTACHMENT C

RFA No. APRA 0608-09

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Department of Health



Assurances

The applicant hereby assures and certifies compliance with all Federal statutes, regulations, policies, guidelines and requirements, including OMB Circulars No. A-21, A-110, A-122, A-128, A- 87; E.O. 12372 and Uniform Administrative Requirements for Grants and Cooperative Agreements -28 CFR, Part 66, Common Rule that govern the application, acceptance and use of Federal funds for this federally-assisted project.

Also, the Application assures and certifies that:

1. It possesses legal authority to apply for the grant; that a resolution, motion or similar action has been duly adopted or passed as an official act of The applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative of The applicant to act in connection with the application and to provide such additional information as may be required.
2. It will comply with requirements of the provisions of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 PL 91-646 which provides for fair and equitable treatment of persons displaced as a result of Federal and federally-assisted programs.
3. It will comply with provisions of Federal law which limit certain political activities of employees of a State or local unit of government whose principal employment is in connection with an activity financed in whole or in part by Federal grants. (5 USC 1501, et. seq.).
4. It will comply with the minimum wage and maximum hour's provisions of the Federal Fair Labor Standards Act if applicable.
5. It will establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
6. It will give the sponsoring agency of the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the grant.
7. It will comply with all requirements imposed by the Federal-sponsoring agency concerning special requirements of Law, program requirements, and other administrative requirements.
8. It will insure that the facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify the Federal grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be used in the project

is under consideration for listing by the EPA.

9. It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973, Public Law 93-234-, 87 Stat. 975, approved December 31, 1976. Section 102(a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any Federal financial assistance for construction or acquisition purposes for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase "Federal Financial Assistance" includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect Federal assistance.
10. It will assist the Federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 USC 470), Executive Order 11593, and the Archeological and Historical Preservation Act of 1966 (16 USC 569a-1 et. seq.) By (a) consulting with the State Historic Preservation Officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8) by the activity, and notifying the Federal grantor agency of the existence of any such properties, and by (b) complying with all requirements established by the Federal grantor agency to avoid or mitigate adverse effects upon such properties.
11. It will comply with the provisions of 28 CFR applicable to grants and cooperative agreements including Part 18. Administrative Review Procedure; Part 22, Confidentiality of Identifiable Research and Statistical Information; Part 42, Nondiscrimination/Equal Employment Opportunity Policies and Procedures; Part 61, Procedures for Implementing the National Environmental Policy Act; Part 63, Floodplain Management and Wetland Protection Procedures; and Federal laws or regulations applicable to Federal Assistance Programs.
12. It will comply, and all its contractors will comply with; Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; Subtitle A, Title III of the Americans with Disabilities Act (ADA) (1990); Title IIX of the Education Amendments of 1972 and the Age Discrimination Act of 1975.
13. In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, sex, or disability against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, U.S. Department of Justice.
14. It will provide an Equal Employment Opportunity Program if required to maintain one, where the application is for \$500,000 or more.
15. It will comply with the provisions of the Coastal Barrier resources Act (P.L 97-348) dated October 19, 1982, (16 USC 3501 et. Seq) which prohibits the expenditure of most new Federal funds within the units of the Coastal Barrier Resources System.

As the duly authorized representative of the applicant/organization, I hereby certify that the applicant will comply with the above assurances.

Applicant Name: _____ IRS/Vendor ID: _____

Address: _____

Authorized Representative: _____ (Print Name & Title)

Signature: _____ Date: _____

ATTACHMENT D

PROPOSED BUDGET

District of Columbia Department of Health
RFA No. **APRA 0608-09**
Addiction Prevention & Recovery Administration
Prevention Centers

Agency Name: _____
Contact Person: _____
Telephone: _____

PROJECT TITLE: _____
TOTAL REQUEST: _____

CATEGORY	ADMINISTRATION	PROGRAM SERVICE	TOTAL
Personnel: Salaries & Wages			
Total Personnel: Salaries & Wages			
Fringe Benefits			
Occupancy			
Travel & Transportation			
Supplies & Minor Equipment			
Client Costs			
Communications			
Other Direct Costs			
Subtotal Direct Costs			
Indirect/Overhead			
TOTAL			

ATTACHMENT D *continued*

PROPOSED BUDGET NARRATIVE

District of Columbia Department of Health
RFA No. **APRA 0608-09**
Addiction Prevention & Recovery Administration
Prevention Centers

Agency Name: _____

Contact Person: _____

Telephone: _____

PROJECT TITLE: _____

TOTAL REQUEST: _____

Personnel: Salaries & Wages

(e.g., Represents .5 FTE – Part-time Program Coordinator who will administer Prevention Center program @ \$40,000)

Fringe Benefits

Occupancy

Travel & Transportation

Supplies & Minor Equipment

Client Costs

Communications

Other Direct Costs

Indirect/Overhead (Must be itemized)

ATTACHMENT E

APRA RECEIPT

ATTACH TWO (2) COPIES OF THIS RECEIPT TO THE OUTSIDE OF THE ENVELOPE

**Prevention Centers
RFA No. APRA 0608-09**

The D.C. DEPARTMENT OF HEALTH IS IN RECEIPT OF

(Contact Name/ Please Print Clearly)

(Organization Name)

(Address, City, State, Zip Code)

(Telephone/Facsimile/Email)

**APRA
(RFA #0608-09)**

PROJECT NAME

(Geographic Designation)

(AMOUNT REQUESTED)

DOH USE ONLY:

Please Indicate Time:

PROPOSAL and _____ COPIES.

RECEIVED ON THIS DATE _____ / _____ /2009

Received By: _____

ATTACHMENT F

District of Columbia Department of Health

PROPOSED WORKPLAN

Addiction Prevention & Recovery Administration

RFA No. APRA 0608-09

Prevention Centers

Agency Name: _____ Contact Person: _____ Telephone: _____

Project Title: _____ TOTAL REQUEST: _____

GOAL 1: INSERT IN THIS SPACE ONE PROPOSED PROGRAM GOAL. Proceed to outline program objectives, activities, targeted dates in the spaces below.**Measurable Objectives/Activities:****Process Objective #1:** *[Example: By September 30, 2010, market the Prevention Center to 3,000 citizens using a consistent logo, graphic design in Wards 7 & 8]*

<u>Key activities needed to meet this objective:</u>	<u>Start Date/s:</u>	<u>Completion Date/s:</u>	<u>Key Personnel (Title)</u>
• • • •	• • • •	• • • •	

Process Objective #2:

<u>Key activities needed to meet this objective:</u>	<u>Start Dates:</u>	<u>Completion Dates:</u>	<u>Key Personnel (Title)</u>
• • • •	• • • •	• • • •	

Process Objective #3:

<u>Key activities needed to meet this objective:</u>	<u>Start Dates:</u>	<u>Completion Dates:</u>	<u>Key Personnel (Title)</u>
• • • •	• • • •	• • • •	

Duplicate this page as needed for additional proposed program goals. Ensure that heading information clearly identifies the applicant's submission, the RFA number and page (e.g. page 2 of 4) of the proposed work plan